

P03000018532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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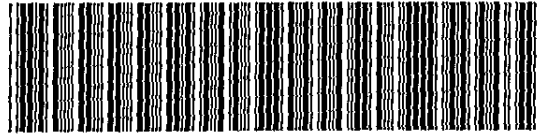
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02-17-03  
T.B.

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: \_\_\_\_\_

Laz Magnolias Restaurant, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: \_\_\_\_\_

Magnolia Perez  
Name (Printed or typed)

5401 NW 79 Ave.  
Address

Miami FL 33166  
City, State & Zip

(305) 406-1789  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

# ARTICLES OF INCORPORATION

of

## LAZ MAGNOLIAS RESTAURANT, INC.

*The undersigned subscriber to these Articles of Incorporation is a natural person competent to contract and hereby form a Corporation for profit under Chapter 607 and/or Chapter 621 of the Florida Statutes.*

### ARTICLE I NAME

The name of the Corporation shall be:

## LAZ MAGNOLIAS RESTAURANT, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5401 NW 79 AVE  
MIAMI, FL. 33166

### ARTICLE III PURPOSE

The purpose for which the Corporation is organized is:

**This Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida**

### ARTICLE IV SHARES

The number of shares of stock is:

**100 Shares**

-cont-

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ARTICLE V INITIAL OFFICERS/DIRECTORS

[illegible][illegible]

**The name and Florida street address of the registered agent is:**

**MAGNOLIA PEREZ**  
**5401 NW 79 AVE MIAMI, FL. 33166**

The name and address of the Incorporator are:

**MAGNOLIA PEREZ**  
**5401 NW 79 AVE MIAMI, FL. 33166**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Signature/Registered Agent Date

Signature/Incorporator Date

01/29/03  
Date

01/29/03  
Date